



IF 1631

PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/867,845	
	Filing Date	May 29, 2001	
	First Named Inventor	Chaitan KHOSLA	
	Art Unit	1631	
	Examiner Name	S. Zhou	
Total Number of Pages in This Submission	19	Attorney Docket Number	300622005500

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 pg + dup) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (14 pgs) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 pg) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Exhibit 1: Copy of postcard submitted with application filed on May 29, 2001 (1 page) Return Receipt Postcard
Remarks <b>Customer No. 25225</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Carolyn A. Favorito		
Date	November 18, 2005	Reg. No.	39,183

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: November 18, 2005	Signature: <u>Judy Bridgwater</u> (Judy Bridgwater)



<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/867,845
		Filing Date	May 29, 2001
		First Named Inventor	Chaitan KHOSLA
		Examiner Name	S. Zhou
		Art Unit	1631
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	300622005500
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	<b>360.00</b>

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
<b>Application Type</b>	<b>Fee (\$)</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>	
		<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>						<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
<u>20</u>		<u>-20 =</u>	<u>x</u>	<u>0.00</u>	<b>Fee (\$)</b> <u>0.00</u>		
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
<u>7</u>		<u>-4 =</u>	<u>3</u>	<u>x 100.00 =</u>	<u>300.00</u>		
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
<u>          </u>		<u>- 100 =</u>	<u>/50</u>		<u>(round up to a whole number) x</u>	<u>          </u>	
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b>	
Other (e.g., late filing surcharge): 2251 Extension for response within first month						<u>60.00</u>	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	39,183
Name (Print/Type)	Carolyn A. Favorito	Telephone	(858) 720-5195
		Date	November 18, 2005